

A School Must Have Heart: Social-Emotional Learning (SEL) in Education

2015 CONFERENCE

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“When educating
the minds of
our youth, we
must not forget
to educate
their hearts.”



And how are the Children?



Canaries in the Coalmine

- 20-25% of youth experience behaviors associated with a mental health disorder (NIMH)
- Intermittent Explosive Disorder (IED) - 8% (6 million)
- Oppositional Defiant Disorder - 10% (5-16%)
- Emotionally Disturbed - 1% (9% of special education)
- Bipolar Disorder - over 1 million (40-fold increase)
- Attention Deficit Hyperactivity Disorder (ADHD) – 11%

Educational Politics

- For decades, our rhetoric and education policies have been based on the premise that the ranking of U.S. students on international tests will lead to a decline in our nation's economic competitiveness and a shortage of American scientists and engineers.
- Education policies have been dominated by test-based accountability, apparently with the expectation that accountability requirements would close the achievement gap, raise our ranking on international comparisons, and lead to a stronger economy and an increased supply of scientists and engineers.

Organization for Economic Cooperation and Development (OECD)

Program for International Student Assessment (PISA)

- Compares approximately 65 countries
- International assessment that measures 15-year-old students' reading, mathematics, and science literacy
- 2000, 2003, 2006, 2009, 2012

PISA Results

- U.S. students in schools with 10% or less poverty are number one country in the world.
- U.S. students in schools with 10-24.9% poverty are third behind Korea, and Finland.
- U.S. students in schools with 25-50% poverty are tenth in the world.

PISA Results

- Of all the nations participating in the PISA assessment, the U.S. has, by far, the largest number of students living in poverty—21.7%. The next closest nations in terms of poverty levels are the United Kingdom and New Zealand have poverty rates that are 75% of ours.

- We continue to mandate accountability requirements that are not used—and in some cases are specifically discouraged—by the very countries whose test scores we most admire, including Finland and Japan.
- We have ignored the strongest evidence emerging from the international tests: the adverse effects of poverty and concentrations of poverty in schools on student performance in all countries.

No Child Left Behind (1/02)

- by 2014 100% of students will be proficient in reading and math – an impossible goal.
- Schools are required to test students annually in reading and math in grades 3 through 8 and at least once in grades 10 through 12. Students must also be tested in science in at least one grade in elementary, middle and high school.
- Schools that don't show that students are making "adequate yearly progress" toward achieving proficiency are subject to federal sanctions.

Race to the Top (2012)

- Teachers will be evaluated in relation to their students' test scores.
- Schools that continue to get low test scores will be closed or turned into charter schools or handed over to private management.
- In low-performing schools, principals will be changed, and all or half of the staff will be turned over.
- States are encouraged to create many more privately managed charter schools.

“Children must
be taught
HOW TO THINK,
not what to think.”

Margaret Mead

NCLB – 10 year report

- Failed to significantly increase average academic performance or to significantly narrow achievement gaps (NAEP).
- U.S. students made greater gains before NCLB became law than after it was implemented

Instructional Dosages

- most teachers kept from doing the one thing that researchers know contributes to student learning, which is developing strong, authentic relationships with kids.
- What withers away, with the emphasis on the “testable” subjects (math, reading), is art, music, recess, physical education, drama, dance, culinary arts, carpentry, and other electives, not to mention SEL and the development of strong classroom communities.

Concerns with increase testing

- Inaccurate and unstable measures of teacher performance
- Teaching to the Test
- Narrowing of the Curriculum
- Use of Valuable Class Time
- Decreases teacher creativity and autonomy
- Money diverted (privatization of education)
- Does not improve student achievement (NAS)
- Does not improve teaching
- Does not predict college readiness/success

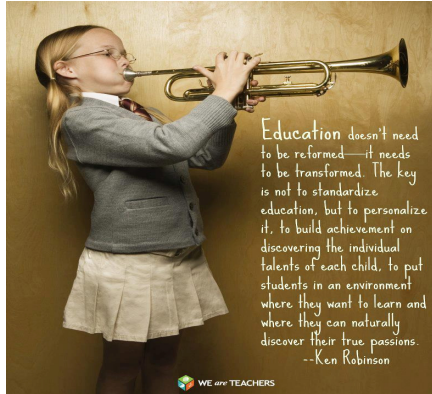
*In the book of life, the answers
aren't in the back.*

—Charlie Brown

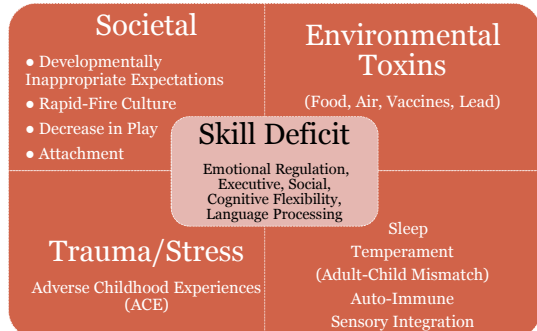


Potential Impact

- Increase in testing (SLOs) – even in Kindergarten
- Increase time for State Tests
- Test Prep – increases in higher grades
- Possibility of field tests
- Diminishes student-teacher relationship
- Decrease in meaningful SEL program



Causes of Challenging Behaviors



ADHD PREVALENCE

- During recent 10 year span the number of ADHD diagnoses has risen 66%

(Academic Pediatrics, 2012)

- CDC estimated 11% prevalence rate with 2/3 of children prescribed medication

(CDC: Increasing Prevalence of Parent-Reported Attention Deficit Hyperactivity Disorder Among Children—United States, 2003 and 2007. November 12, 2010 / 59(44):1439-1443.)

CDC 2011

- Approximately 11% of children 4-17 years of age (6.4 million) have been diagnosed with ADHD as of 2011.
- The percentage of children with an ADHD diagnosis continues to increase, from 7.8% in 2003 to 9.5% in 2007 and to 11.0% in 2011.
- Rates of ADHD diagnosis increased an average of 3% per year from 1997 to 2006 and an average of approximately 5% per year from 2003 to 2011.
- Boys (13.2%) were more likely than girls (5.6%) to have ever been diagnosed with ADHD.
- The average age of ADHD diagnosis was 7 years of age, but children reported by their parents as having more severe ADHD were diagnosed earlier.
- Prevalence of ADHD diagnosis varied substantially by state, from a low of 5.6% in Nevada to a high of 18.7% in Kentucky.

2012 Consensus report of the APA Work Group on Neuroimaging Markers of Psychiatric Disorders

- “The vast majority of neuroimaging studies to date demonstrate relative, quantitative differences between ADHD and typically developing controls that are neither sufficiently large nor specific enough to be useful on a case-by-case basis as a diagnostic or treatment biomarker.”
- “Notably absent from structural neuroimaging literature examining biomarkers of ADHD are treatment studies which contrast morphometric differences before and after medication treatment. To our knowledge, no controlled trials have examined the effect of stimulant medication on structural brain abnormalities in youth with ADHD, suggesting a critical area for future research.”

Psychiatric Times

Psychiatry's New Brain-Mind and the Legend of the “Chemical Imbalance”
By Ronald Pies, MD | July 11, 2011

“In truth the ‘chemical imbalance’ notion was always a kind of urban legend – never a theory seriously proposed by well-informed psychiatrists.”

- Ronald Pies M.D.

- **British Columbia, CANADA**

- The youngest children in the classroom are significantly more likely to be diagnosed with attention-deficit/hyperactivity disorder (ADHD) -- and prescribed medication -- than their peers in the same grade, according to a study just published in *CMAJ* (*Canadian Medical Association Journal*).
- Researchers found that children were 39% more likely to be diagnosed and 48% more likely to be treated with medication for ADHD if born in December compared to January. Due to the Dec. 31 cut-off birth date for entry into school in British Columbia, children born in December would typically be almost a year younger than their [classmates](#) born in January.

United States Study

Found children born just after the cutoff, who are relatively old-for-grade, have a significantly lower incidence of ADHD diagnosis and treatment compared with similar children born just before the cutoff date, who are relatively young-for-grade.

[Evans WN](#), [Morrill MS](#), and [Parente ST](#) (2010). **Measuring inappropriate medical diagnosis and treatment in survey data: The case of ADHD among school-age children.** *J Health Econ.*; 29(5):657-73.

University of Helsinki (2009) Inadequate Sleep Leads To Behavioral Problems

- Study suggests that children's short sleep duration even without sleeping difficulties increases the risk for behavioral symptoms of ADHD.
- United States - a third of children are estimated to suffer from inadequate sleep.

STRESSFUL ENVIRONMENTS

Affects Prefrontal Cortex which is critical in self-regulatory activities, both emotional and cognitive. Leads to difficulty with:

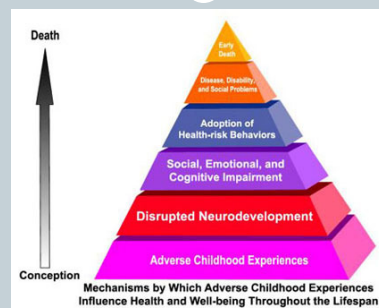
- Concentration
- Sitting Still
- Rebounding from Disappointment
- Following Directions

STRESSFUL ENVIRONMENTS

Impairs Executive Functions

- Self-Control in cognitive and emotional realms
- Working Memory
- Current system adds to stress
- Quantity v. Quality (meaningful)

Adverse Childhood Experiences (www.ACEstudy.org)



TRAUMA and ADHD

▣ Adverse Childhood Experiences (ACE)

1. Emotional, Physical, Sexual Abuse
2. Neglect
3. Parental Separation
4. Parental Incarceration
5. Drug Abuse
6. Domestic Violence
7. Extreme Poverty

Adverse Childhood Experiences

- Approximately 64% of children experience at least 1 adverse experience
- 20% experience 3 or more

U.S. Centers for Disease Control and Prevention (CDC)

IMPACT ON SCHOOL

One out of Four children attending school has been exposed to a traumatic event that can affect learning and/or behavior.

ACE SCORE	LEARNING OR BEHAVIOR PROBLEM
ZERO	3%
FOUR OR HIGHER	51%

Adverse Experiences

- Exposure to such events has been shown to increase the child's short- and long-term social-emotional and behavioral struggles (e.g., anxiety, acting out behaviors, impulsivity, inattention, depression, etc.) and therefore often is misdiagnosed as another disorder (e.g., ADHD, ODD, Bipolar).

Multimodal Treatment of ADHD (NIMH)

- At end of 14 months, "carefully crafted medication management" had proven to be superior to behavioral treatment in terms of reducing core ADHD symptoms. There was a hint that medicated children also did better on reading tests.

MTA STUDY

- At the end of 36 months, "medication use was a significant marker not of beneficial outcome, but of deterioration. That is, participants using medication in the 24-to-36 month period actually showed increased symptomatology during that interval relative to those not taking medication." Medicated children were also slightly smaller, and had higher delinquency scores.

MTA STUDY

- At end of six years, medication use was “associated with worse hyperactivity-impulsivity and oppositional defiant disorder symptoms”, and with greater “overall functional impairment.”

Sources: The MTA Cooperative Group, “A 14-month randomized clinical trial of treatment strategies for attention deficit/hyperactivity disorder”, *Archives of General Psychiatry* 56 (1999):1073-86. Jensen, “A 3-year follow-up of the NIMH MTA study”, *J Amer Academy of Child & Adolescent Psychiatry* 46 (2008):989-1002. Molina, “MTA at 8 years”, *J Amer Academy of Child & Adolescent Psychiatry* 48 (2009):484-500.

Source: J. Swanson. “Evidence, interpretation and qualification from multiple reports of long-term outcomes in the multimodal treatment study of children with ADHD Part II.” *J of Attention Disorders* 12 (2008):15-43.

“The findings . . . were not consistent with views and expectations about medication effects held by many investigators and clinicians in the field. That is, long term benefits from consistent treatment were not documented; selection bias did not account for the loss of relative superiority of medication over time; there was no evidence for “catch up” growth; and early treatment with medication did not protect against later adverse outcomes.”

Multimodal Treatment Study for ADHD

- Professor William Pelham Ph.D.:
‘I think we exaggerated the beneficial impact of medication in the first study. We had thought that children medicated longer would have better outcomes. That didn’t happen to be the case...In the short run [medication] will help the child behave better, in the long run it won’t. And that information should be made very clear to parents.’

DERP 2005: A Meta-Analysis of the Literature

In a review of 2,287 studies:

- There is “no good quality evidence on the use of drugs to affect outcomes relating to global academic performance, consequences of risky behaviors, social achievements, etc.”

-- Drug Effectiveness Review Project
Oregon Health and Science University, 2005

Source: McDonagh, “Drug class review on pharmacologic treatment for ADHD,” 2006.
<http://www.ohsu.edu/drugeffectiveness>

RAINE - Australia

- ▣ In February 2010 a review of information from the Raine Study, a longitudinal study of the health and wellbeing of thousands of Western Australian children, provided the world’s first long term (8 year) data on the safety and efficacy of ADHD stimulants. It provided challenging evidence that amongst children diagnosed with ADHD those ‘medicated’ with stimulants had significantly worse outcomes than those ‘never medicated’.

Source: Western Australian Department of Health, “Raine ADHD study: Long-term outcomes associated with stimulant medication in the treatment of ADHD children,” 2009.

RAINE STUDY - AUSTRALIA

- ▣ Medicated ADHD children were 10 times more likely than unmedicated ADHD children to be identified by teachers as performing below age level.
- ▣ A small effect size showed worse ADHD symptoms in the medicated group
- ▣ Medicated children had elevated diastolic BP
- ▣ Conclusion: Medication does not translate into long-term benefits to the child’s social and emotional outcomes, school-based performance, or symptom improvement.

One-year Outcomes in Medicaid Population, 2010

- At end of one year, no difference between those who received care and those who did not.
- “Compared with children receiving no care, children in specialty mental health clinics were more likely to have high functional impairment at 6- and 12-month follow-ups.”

Source: Zima, “Quality of care for childhood attention-deficit/hyperactivity disorder in a managed care Medicaid program.” *J Amer Acad of Child & Adolescent Psychiatry* (2010): 49, 1225-1237.

“Attention-deficit drugs increase concentration in the short term, which is why they work so well for college students cramming for exams. But when given to children over long periods of times, they neither improve school achievement nor reduce behavior problems . . . to date, no study has found any long-term benefit of attention-deficit medication on academic performance, peer relationships, or behavior problems, the very things we would want most to improve . . . The drugs can also have serious side effects, including stunting growth.”

--Alan Sroufe, professor emeritus of psychology at the University of Minnesota

Source: *New York Times*, “Ritalin Gone Wrong,” January 28, 2012.

Study of Long-Term Outcomes in Quebec, 2013

“The increase in medication use is associated with increases in unhappiness and a deterioration in relationship with parents. These emotional and social effects are concentrated among girls, who also experience increases in anxiety and depression. We also see some evidence of deterioration in contemporaneous educational outcomes including grade repetition and mathematics scores. When we turn to an examination of long-term outcomes, we find that increases in medication use are associated with increases in the probability that boys dropped out of school and with marginal increases in the probability that girls have ever been diagnosed with a mental or emotional disorder.”

Source: J. Currie. “Do stimulant medications improve educational and behavioral outcomes for children with ADHD?” NBER working paper 19105, June 2013.

Spanish Investigators: Time To Rethink Use of Stimulants

“These drugs are the same stimulants whose harmful consequences are well known in other uses in adults. In this paper we have carried out an exhaustive review of the sources from scientific evidence regarding the short and long term effectiveness of the medication . . . The result is disappointing and should lead to a modification of the [Clinical Practice Guidelines] to the use of drugs as tools of last resort, in a small number of cases and limited and short periods of time.”

--Miguel Valverde Eizaquirre

Source: M. Valverde. “Outreach and limitations of the pharmacological treatment of Attention Deficit Disorder with Hyperactivity (ADHD) in children and adolescents and Clinical Practice Guidelines: A literature review.” *Rev Asoc Esp. Neuropsiq* 34 (2014):37-74.

What Do We REALLY Want for our Children?

Social-Emotional Learning

- SEL is a process for helping children and even adults develop the fundamental skills for life effectiveness. SEL teaches the skills we all need to handle ourselves, our relationships, and our work, effectively and ethically.

Social-Emotional Learning (SEL)

A process through which children and adults develop the fundamental social and emotional skills of:

- 1. Self-Awareness
- 2. Self-Management
- 3. Social Awareness
- 4. Relationship Skills
- 5. Responsible Decision Making

Social-Emotional Learning (SEL)

1. Self-Awareness

- Recognizing one's emotions and values as well as one's strengths and limitations

2. Self-Management

- Managing emotions and behaviors to achieve one's goals

3. Social Awareness

- Showing understanding and empathy for others

Social-Emotional Learning (SEL)

4. Relationship Skills

- Forming positive relationships, working in teams, dealing effectively with conflict

5. Responsible Decision Making

- Making ethical, constructive choices about personal and social behavior

SEL

These skills include -

- recognizing and managing emotions
- developing caring and concern for others
- establishing positive relationships
- making responsible decisions
- handling challenging situations constructively and ethically.

SEL (con't)

They are the skills that allow children to –

- calm themselves when angry
- make friends
- resolve conflicts respectfully
- make ethical and safe choices

WHY IS SEL SO CRITICAL?

- From service industries to professional organizations businesses seek individuals with strong “communication skills, honesty and integrity, interpersonal skills, motivation and initiative, a strong work ethic, and teamwork skills, in that order”

Rothstein, 2004, *Class and Schools: Using Social, Economic, and Educational Reform to Close the Achievement Gap*. Washington, DC

C.A.S.E.L. Meta-Analysis

- 207 research studies on the effects of Social and Emotional Programs
- 11% point gain on academic test scores
- 09% improvement in behavior
- 10% decrease in stress, anxiety, depression

Academic Impact of SEL

- 0.28 SEL effect size on academic performance
- More impact than most academic interventions.
- About the impact of a good literacy intervention.

Roger Weissberg et al Meta Analysis (2008)

Academic Impact of SEL

- Children's pro-social behaviors, such as helping, sharing, & cooperating exhibited by students in classroom *were better predictors of academic achievement than were* their standardized test scores.

K.R. Wentzel, "Does Being Good Make the Grade? Social Behaviour and Academic Competence in Middle School, *Journal of Educational Psychology* 85 (1993): 357-364.

Academic Impact of SEL

- Examination of students' social & emotional competence and academic achievement from Grade 3 to 8 revealed that changes in academic achievement in Grade 8 could be *better predicted from knowing children's social competence than from academic achievement.*

Caprara, Barbanelli, Pastorelli, Bandura, and Zimbardo, "Prosocial Foundations of Children's Academic Achievement," *Psychological Science* 11 (2000): 302-306.

40 Developmental Assets

- Grounded in extensive research in youth development, resiliency, and prevention, the Developmental Assets represent the relationships, opportunities, and personal qualities that young people need to avoid risks and to thrive.

Search Institute

EXTERNAL ASSETS

- **Support** (Family, Caring School Climate, Parent Involvement in Schooling)
- **Empowerment** (Service to Others, Resource, Safety)
- **Boundaries & Expectations** (Boundaries, Role Models, Peer Influence, Expectations)
- **Constructive Use of Time** (Creative Activities, Quality Time, Programs)

INTERNAL ASSETS

- **Commitment to Learning** (Motivation, Engagement, HW, Reading as Pleasure)
- **Positive Values** (Integrity, Responsibility, Caring, Honesty, Healthy Lifestyle)
- **Social Competencies** (Planning & Decision Making, Interpersonal, Resistance, Peaceful Conflict Resolution)
- **Positive Identity** (Power, Sense of Purpose, Positive View of Personal Future)

SEARCH INSTITUTE (2003)

- Studies of more than 2.2 million young people in the United States consistently show that the more assets young people have, the less likely they are to engage in a wide range of high-risk behaviors and the more likely they are to thrive.
- Assets have power for all young people, regardless of their gender, economic status, family, or race/ethnicity. Furthermore, levels of assets are better predictors of high-risk involvement and thriving than poverty or being from a single-parent family.

Percentage of Youth Reporting Selected High-Risk Behavior Patterns, by Level of Developmental Assets

The average young person experiences fewer than half of the 40 assets. Boys experience three fewer assets than girls (17.2 assets for boys vs. 19.9 for girls).

High-Risk Behavior Pattern	0-10 Assets	11-20 Assets	21-30 Assets	31-40 Assets
PROBLEM ALCOHOL USE	45%	26%	11%	3%
VIOLENCE	62%	38%	18%	6%
SCHOOL PROBLEMS	44%	23%	10%	4%

Positive Relationship Between Assets and Future Academic Achievement

	0-10 Assets	11-20 Assets	21-30 Assets	31-40 Assets
AVERAGE GPA	2.1	2.8	3.1	3.3

7 Character Strengths



Peterson, C. and Seligman, M. E. P. (2004). *Character strengths and virtues*. Oxford: Oxford UP.

ZEST -- approaching life with excitement and energy; feeling alive and activated

- Actively participates
- Shows enthusiasm
- Invigorates others

GRIT -- finishing what one starts; completing something despite obstacles; a combination of persistence and resilience.

- Finishes whatever he or she begins
- Tries very hard even after experiencing failure
- Works independently with focus

CURIOSITY -- taking an interest in experience and learning new things for its own sake; finding things fascinating

- Is eager to explore new things
- Asks and answers questions to deepen understanding
- Actively listens to others

OPTIMISM -- expecting the best in the future and working to achieve it

- Gets over frustrations and setbacks quickly
- Believes that effort will improve his or her future

7 Character Strengths

SOCIAL INTELLIGENCE -- *being aware of motives and feelings of other people and oneself; including the ability to reason within large and small groups.*

- Able to find solutions during conflicts with others
- Demonstrates respect for feelings of others
- Knows when and how to include others

GRATITUDE -- *being aware of and thankful for opportunities that one has and for good things that happen*

- Recognizes and shows appreciation for others
- Recognizes and shows appreciation for his/her opportunities

SELF-CONTROL --- *regulating what one feels and does; being self-disciplined*

SELF-CONTROL (SCHOOL WORK)

- Comes to class prepared
- Pays attention and resists distractions
- Remembers and follows directions
- Gets to work right away rather than procrastinating

SELF-CONTROL (INTERPERSONAL)

- Remains calm even when criticized or otherwise provoked
- Allows others to speak without interruption
- Is polite to adults and peers
- Keeps temper in check

Courage
doesn't always
roar. Sometimes
courage is the
quiet voice at
the end of the
day saying, "I
will try again
tomorrow."

—Mary Anne
Radmacher



"It's hard
to beat a
person
who never
gives up."

— Babe Ruth



WE are TEACHERS

Study on the Effect of Praise

Columbia University – 20 schools in NY (400 5th graders)

- Praised for *Effort* vs. *Intelligence*
"You must have worked really hard" or
"You must be smart at this"
- 4 trials -
 1. Nonverbal IQ tests (puzzles) - easy
 2. choice of same of more challenging
 3. More difficult tasks (approx 2 years above)
 4. Repeat of Step 1 tests - easy

RESULTS

Trial 2

'effort' group chose more challenging tasks (90%),
while majority of 'smart' group chose easy task

Trial 3 – 'effort' group handled task better

Trial 4 – 'effort group' improved by 30%
'smart group' declined by 20%

East Harlem – Jr. High School

700 students
(predominantly minority and low achieving)

2 groups – eight session workshop

1. study skills only
2. study skills & special module on how intelligence is not innate (two 25 minute lessons)

Improvement in study habits and grades
for group 2

I am 5


I am not built to sit still, keep my hands to myself, take turns, be patient, stand in line, or keep quiet.

I need motion, I need novelty, I need adventure, and I need to engage the world with my whole body.

Let Me Play

(Trust me, I'm learning)





"Play is often talked about as if it were a relief from serious learning. But for children, play is serious learning. Play is the work of childhood."

- Mr. Fred Rogers

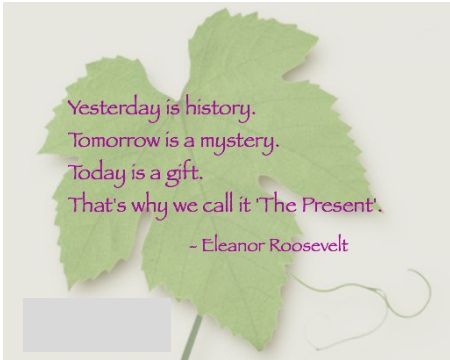
edutopia.org

The Need For Play

- Research shows that children who engage in complex forms of socio-dramatic play have greater language skills than non-players, better social skills, more empathy, more imagination, and more of the subtle capacity to know what others mean. They are less aggressive and show more self-control and higher levels of thinking. Animal research suggests that they have larger brains with more complex neurological structures than non-players.

Importance of Relationship

- Positive alliance is one of the best predictors of outcome
(Orlinsky, Ronnestad, Willutzki, 2003)
- Relationship Factors account for 30% of change
(Lambert in Barry Duncan)



Yesterday is history.
Tomorrow is a mystery.
Today is a gift.
That's why we call it 'The Present'.

- Eleanor Roosevelt

MINDFULNESS

- Mindfulness is a particular way of paying attention. It is the mental faculty of purposefully bringing awareness to one's experience. Mindfulness can be applied to sensory experience, thoughts, and emotions by using sustained attention and noticing our experience without reacting.

BENEFITS OF MINDFULNESS

- Better focus and concentration
- Increased sense of calm
- Decreased stress & anxiety
- Enhanced health
- Improved impulse control
- Increased self-awareness
- Skillful responses to difficult emotions
- Increased empathy and understanding of others
- Development of natural conflict resolution skills

Center for Investigating Healthy Minds University of Wisconsin-Madison

Examined program on mindfulness and effects on behavior and executive function in elementary school children. Executive function is the ability to organize behavior, plan things sequentially, hold attention on a task and follow it.

The study, published in the *Journal of Applied School Psychology*, showed that mindfulness improved executive function in the children, particularly those who started out with lower executive functioning.

Pilot research study on 79 2nd and 3rd graders in a low-income school is one of the largest mindfulness studies involving young children to date.

Study Highlights

- Before program, children were initially scoring far below the normative scores for their ages on a computerized attention test (ANT-C)
- Large improvements came after program, and were sustained even 3 months later.
- The test indicates executive attention performance, which is key to decision-making and strongly correlated with academic success.
- The results suggest that mindfulness can help to address major learning barriers for stressed children.
- Social skills also improved after program, and were sustained 3 months afterwards.

MINDFULNESS

- In a recent study of 102 adolescents being treated for mental health problems in an outpatient psychiatric clinic, almost 80% were no longer diagnosed with one or more of their mental health diagnosis(es) after an 8 week Mindfulness Based Stress Reduction for Teens (MBSR-T) program.

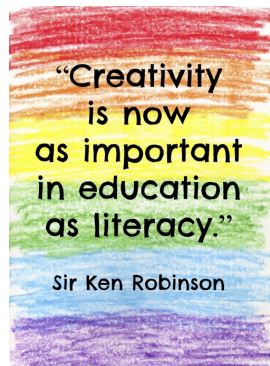
[Study published by Gina Biegel, MFT in the *Journal of Consulting and Clinical Psychology*, 10/09]

Nurtured Heart Approach

- A Social-Emotional Learning Approach..... Not A Program
- A parenting/teaching model that fosters the child's inner strength (e.g., character, self-confidence, problem-solving), giving them the moral compass necessary to effectively deal with and solve problems as well as succeed socially and emotionally.

Nurtured Heart Approach

- Creating a world of first hand experiences: "Here you are being successful..."
- Relentlessly reflecting: "This is who you really are... It's not a question of whether you can or can't, you are..."
- A new portfolio.



Dan Siegel M.D. - Brainstorm

The Healthy Mind Platter



The Healthy Mind Platter for Optimal Brain Matter™

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Seven daily essential mental activities to optimize brain matter and create well-being (Siegal M.D.)

- **Focus Time** When we closely focus on tasks in a goal-oriented way, we take on challenges that make deep connections in the brain.
- **Play Time** When we allow ourselves to be spontaneous or creative, playfully enjoying novel experiences, we help make new connections in the brain.
- **Connecting Time** When we connect with other people, ideally in person, and when we take time to appreciate our connection to the natural world around us, we activate and reinforce the brain's relational circuitry.
- **Physical Time** When we move our bodies, aerobically if medically possible, we strengthen the brain in many ways.

Seven daily essential mental activities to optimize brain matter and create well-being

- **Time In** When we quietly reflect internally, focusing on sensations, images, feelings and thoughts, we help to better integrate the brain.
- **Down Time** When we are non-focused, without any specific goal, and let our mind wander or simply relax, we help the brain recharge.
- **Sleep Time** When we give the brain the rest it needs, we consolidate learning and recover from the experiences of the day.